

PATENT**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of: Merz et al.

Attorney Docket No.: APL1P202/P2625

Application No.: 09/842,408

Examiner: Lea Edmonds, Lisa S

Filed: April 24, 2001

Group: 2835

Title: COMPUTER COMPONENT
PROTECTION

Confirmation No.: 9091

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as first-class mail on July 7, 2004 in an envelope addressed to the Commissioner for Patents, P.O. Box 1450 Alexandria, VA 22313-1450.

Signed: _____

Agnes Spence

AMENDMENT D**RECEIVED
CENTRAL FAX CENTER**

JUL 07 2004

OFFICIAL

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the office action dated April 8, 2004, please enter the following amendments and remarks.

Amendments to the Claims are reflected in the Listing of Claims which begins on page 2 of this paper.

Remarks begin on page 8 of this paper.

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Agnes Spence

AMENDMENT TRANSMITTAL

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

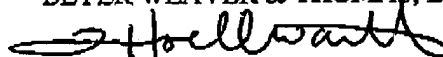
Transmitted herewith is an Amendment in the above-identified application.

The fee has been calculated as shown below.

	Claims After Amendment		Highest Previously Paid For	Present Extra	Small Entity Rate Fee	Large Entity Rate Fee
Total Claims	36	MINUS	59	0	x 9 =	x 18 =
Independent Claims	3	MINUS	4	0	x 43 =	x 86 =
Multiple Dependent Claim Present and Fee Not Previously Paid					\$145.00	\$290.00
Total					\$0	\$0

- ☐ Applicant(s) hereby petition for a _____ month extension(s) of time to respond to the aforementioned Office Action.
- ☒ Applicant(s) believe that no (additional) Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 500388.
- ☐ Enclosed is our Check No. _____ in the amount of \$_____ to cover the additional claim fee and/or extension of time fees.
- ☒ Please charge the required fees, or any additional fees required to facilitate filing the enclosed response, to Deposit Account No. 500388 (Order No. APL1P202).

Respectfully submitted,
BEYER WEAVER & THOMAS, LLP



Quin C. Hoellwarth
Reg. No. 45,738

P.O. Box 778
Berkeley, CA 94704-0778

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JUL 07 2004

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July 7, 2004

Receiver: Examiner Lisa S. Lea Edmonds
Art Unit 2835

TEL #:

FAX #: 703-872-9306

Sender: Quin C. Hoellwarth, Reg. No. 45,738

Re: Amendment Transmittal (1 pgs.)
Amendment D (14 pgs.)
Application No. 09/842,408
Attorney Docket No. APL1P202/P2625

Pages Including Cover Sheet(s): 16

MESSAGE:

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